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Bib Data Sheet

CONFIRMATION NO. 6263

SERIAL NUMBER 09/894,950	FILING DATE 06/27/2001 RULE	CLASS 386	GROUP ART UNIT 2615	ATTORNEY DOCKET NO. 07977/280001/US5027
APPLICANTS Shunpei Yamazaki, Tokyo, JAPAN; Jun Koyama, Kanagawa, JAPAN;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS ***** JAPAN 2000-194222 06/28/2000				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/20/2001				
Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 20	TOTAL CLAIMS 58
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance			INDEPENDENT CLAIMS 8
Verified and Acknowledged	Examiner's Signature	Initials		
ADDRESS SCOTT C. HARRIS Fish & Richardson P.C. Suite 500 4350 La Jolla Village Drive San Diego, CA 92122				
TITLE Semiconductor device and manufacturing method thereof				
FILING FEE RECEIVED 1794	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____	



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APPLICANTS

Shunpei Yamazaki, Tokyo, JAPAN;
 Jun Koyama, Kanagawa, JAPAN;

** CONTINUING DATA ***** *NONE*
CYME

** FOREIGN APPLICATIONS *****
CYME
 JAPAN 2000-194222 06/28/2000

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 08/20/2001

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Verified and Acknowledged <i>CYME</i> Examiner's Signature Initials				

ADDRESS

26171

TITLE

Semiconductor device and manufacturing method thereof

FILING FEE RECEIVED 1794	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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